

# Keep Your Client Database Up-To-Date

## NCOA<sup>Link™</sup> Move-Update Service

How many of your clients have moved\* within the past year?



\* Typically on the reports we run it is about 10% to 15% of your client database.

About 43 million Americans move each year, making it difficult to maintain a high-quality client database and mailing list. Find out if and where your customers have moved with our NCOA<sup>Link™</sup> Move-Update service.

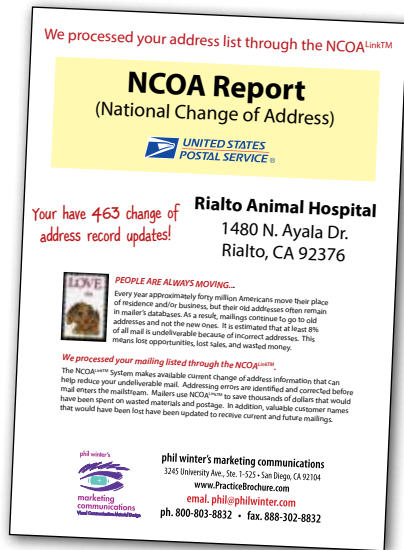
The NCOA<sup>Link™</sup> processing is a database of approximately 160 million permanent change of address records consisting of the names and addresses of individuals, families and businesses who have filed a change of address with the USPS®.

Change of address processing pays for itself, reducing returned or discarded mail and wasted money on postage and production.

Ask us to identify which of your customers have moved and where! It's easy, inexpensive and fast to process your client database and generate your move-update report.

phil winter's marketing communications

ph. 800-803-8832 • www.philwinter.com • fax 888-302-8832



# Client Database Move-Update

fax order to 888-302-8832

Email list file to [phil@philwinter.com](mailto:phil@philwinter.com)

### Choose your search duration

- 18 month move-update service database search  
\$35 per thousand records processed (\$50 min charge)
- 48 month move-update service database search  
\$40 per thousand records processed (\$50 min charge)

You will be mailed a full move update report within 48 hours.

Email you client address list in Excel or tab delimited file to include these fields:

- Fname
- Lname
- Address
- Address2 (optional)
- City
- State
- Zip

Email list file to [phil@philwinter.com](mailto:phil@philwinter.com)

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Practice Name: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

Circle Credit Card Type: VISA MASTERCARD AMX DISCOV

C.C. #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVC# \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

FAX #: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Signature: \_\_\_\_\_

Website: \_\_\_\_\_